Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Maurice First name	<b>Debra</b> First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Liggins Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1990	xxx-xx-9309

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	0000 Farancial Assessed NF	If Debtor 2 lives at a different address:		
		8062 Emerald Avenue NE Canton, OH 44721  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Stark			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

		rice Liggins ra Liggins					Case numbe	PF (if known)	
Par	t 2: Tell th	e Court About \	our Bankrup	tcy Case					
7. The chapter of the Bankruptcy Code you are					cription of each, see e top of page 1 and			342(b) for Individuals Filing for Bar	nkruptcy
	choosing t	o file under	■ Chapter 7						
			☐ Chapter 1	1					
			☐ Chapter 1	2					
			☐ Chapter 1	3					
8.	How you w	ill pay the fee	about h order. l a pre-p	now you may pa If your attorney printed address	eay. Typically, if you a is submitting your p s.	are paying the ayment on y	ne fee yourself, you m your behalf, your attor	rk's office in your local court for m nay pay with cash, cashier's check ney may pay with a credit card or	k, or money check with
					<b>e in installments.</b> If <i>allment</i> s (Official Fo		this option, sign and a	attach the Application for Individua	als to Pay
			but is r applies	not required to, to your family	waive your fee, and size and you are un	may do so dable to pay t	only if your income is the fee in installments	are filing for Chapter 7. By law, a juless than 150% of the official pove s). If you choose this option, you m B) and file it with your petition.	erty line that
9.	Have you f		■ No.						
	bankruptcy last 8 years	/ within the s?	☐ Yes.						
	•			istrict		When		Case number	
			D	istrict		When		Case number	
			D	istrict		When		Case number	
10.	filed by a s	ding or being pouse who is his case with a business	■ No □ Yes.						
				ebtor				Relationship to you	
				istrict		When _		Case number, if known	
				ebtor		NA (I)		Relationship to you	
			D	istrict		When _		Case number, if known	
11.	Do you ren		■ No.	Go to line 12.					

☐ Yes.

No. Go to line 12.

this bankruptcy petition.

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

	otor 1 Maurice Liggins otor 2 Debra Liggins			Case number (if known)				
Par	Report About Any Bu	sinesses `	You Own as a Sole Proprie	tor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Name and location of bus	siness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code				
	ox to describe your business: ness (as defined in 11 U.S.C. § 101(27A))							
			☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (as o	lefined in 11 U.S.C. § 101(53A))				
				er (as defined in 11 U.S.C. § 101(6))				
			☐ None of the above	e				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	are filling under Chapter 11, the court must know whether you are a small business debtor so that it can set approprilines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemen attions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing under Chap	oter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?					
	public health or safety? Or do you own any		W					
	property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?					
				Number, Street, City, State & Zip Code				

Debtor 1 Maurice Liggins
Debtor 2 Debra Liggins

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb Deb	tor 1 Maurice Liggins tor 2 Debra Liggins				Case number (i	if known)	
Part	6: Answer These Questi	ions for R	eporting Purposes				
16.	What kind of debts do 16a. you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busin money for a business or investm				
			☐ No. Go to line 16c.	-			
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe t	that are not consu	mer debts or business o	debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yare paid that funds will be availab			ry is excluded and administrative expenses	
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		■ No				
			☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1		☐ 1,000-5,000 ☐ 5001-10,00 ☐ 10,001-25,0	0	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
		□ 200-9	99				
19.	How much do you estimate your assets to be worth?	□ \$0 - \$50,000 □ \$50,001 - \$100,000		□ \$1,000,001 - □ \$10,000,001		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion	
	be worth.		001 - \$500,000 001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	□ \$0 - \$50,000 □ \$50,001 - \$100,000		□ \$1,000,001 □ \$10,000,00	- \$10 million 1 - \$50 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion	
	to be:		001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
Part	7: Sign Below						
For	you	I have ex	camined this petition, and I declare	under penalty of	perjury that the informat	tion provided is true and correct.	
			chosen to file under Chapter 7, I a tates Code. I understand the relief			nder Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.	
			rney represents me and I did not p nt, I have obtained and read the no			n attorney to help me fill out this	
		I request	relief in accordance with the chap	ter of title 11, Unit	ed States Code, specifi	ed in this petition.	
			cy case can result in fines up to \$2			property by fraud in connection with a urs, or both. 18 U.S.C. §§ 152, 1341, 1519	
		/s/ Mau	rice Liggins		/s/ Debra Liggins		
			e Liggins e of Debtor 1		<b>Debra Liggins</b> Signature of Debtor 2		
		Executed	d on December 5, 2018		Executed on <b>Dece</b>	mber 5, 2018	

MM / DD / YYYY

MM / DD / YYYY

Debtor 1	Maurice Liggins		
Debtor 2	Debra Liggins	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Edward S Lake	Date	December 5, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Edward S Lake		
Printed name		
Lake Legal Services, LLC		
Firm name		
4450 Belden Village Street NW		
Suite 804		
Canton, OH 44718		
Number, Street, City, State & ZIP Code		
Contact phone (330) 605-3508	Email address	info@ohiobankruptcyrelief.com
0068751 OH		
Bar number & State		

Fill	in this information to identi	fy your case:			
	tor 1 Maurice Li				
D.,	First Name	Middle Name	Last Name		
	tor 2 Debra Ligg use if, filing) First Name	JINS Middle Name	Last Name		
Uni	ed States Bankruptcy Court f	or the: NORTHERN DISTR	ICT OF OHIO		
Cas	e number				
(if kn				_	k if this is an nded filing
				amer	idea iiiiig
Of	ficial Form 106Su	ım			
		<del></del>	and Certain Statistical Information		12/15
info	mation. Fill out all of your s original forms, you must fi	schedules first; then complet Il out a new <i>Summary</i> and ch	ple are filing together, both are equally responsible e the information on this form. If you are filing amer neck the box at the top of this page.		
, a	Cummanizo Four 7.00	<u></u>		Your a	esats
					of what you own
1.	Schedule A/B: Property (C 1a. Copy line 55, Total real	Official Form 106A/B) estate, from Schedule A/B		\$	156,900.00
	1b. Copy line 62, Total pers	onal property, from Schedule A	/B	\$	11,035.00
	1c. Copy line 63, Total of all	property on Schedule A/B		\$	167,935.00
Par	2: Summarize Your Liab	pilities			
					iabilities nt you owe
2.		Have Claims Secured by Prop in Column A, Amount of claim	erty (Official Form 106D) , at the bottom of the last page of Part 1 of Schedule D	. \$	207,214.00
3.		no Have Unsecured Claims (Ofform Part 1 (priority unsecured c	ricial Form 106E/F) aims) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from	om Part 2 (nonpriority unsecure	ed claims) from line 6j of Schedule E/F	\$	65,382.00
			Your total liabilitie	s   \$	272,596.00
Par	3: Summarize Your Inco	ame and Evnences			
		·			
4.	Schedule I: Your Income (O Copy your combined month		dule I	\$	6,061.00
5.	Schedule J: Your Expenses Copy your monthly expense			\$	5,739.00
Par	4: Answer These Quest	ions for Administrative and S	Statistical Records		
6.		tcy under Chapters 7, 11, or a	13?  n. Check this box and submit this form to the court with y	our other sc	hedules.
	■ Yes	•	,		
7.	What kind of debt do you	have?			
			ner debts are those "incurred by an individual primarily for 8-9g for statistical purposes. 28 U.S.C. § 159.	or a persona	l, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information
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the court with your other schedules.

page 1 of 2

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Debtor 1	Maurice Liggins
Debtor 2	Debra Liggins

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,915.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	rmation to identify you	r odoo dila ilii	.09	<b>,</b>			
Debtor 1	Maurice Liggins	Middle I	Nome	Last Name			
Debtor 2	Debra Liggins	Middle	INAITIE	Last Name			
Spouse, if filing)	First Name	Middle	Name	Last Name			
nited States E	Bankruptcy Court for the:	NORTHERN	N DISTI	RICT OF OHIO			
	. ,						_
ase number							☐ Check if this is a amended filing
N(() - : - 1   F	400A/D						
	orm 106A/B						
cneau	le A/B: Pro	perty					12/15
Do you own o	r have any legal or equitab	ole interest in ar	ny resid	ence, building, land, or similar property?	,		
☐ No. Go to P  Yes. Where	art 2. e is the property?						
Yes. Where		on .	■	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amo	ount of any secured	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
Yes. Where	e is the property?  Herald Avenue NE  Les, if available, or other description	on 9721-0000	•	Single-family home Duplex or multi-unit building	the amo Creditor	ount of any secured	d claims on Schedule D:
Yes. Where  1  8062 Em  Street address	e is the property?  Herald Avenue NE  Les, if available, or other description			Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property	Current entire p	ount of any secured by the Maye Clair.  It walue of the	d claims on Schedule D: ms Secured by Property.  Current value of the
Yes. Where  1  8062 Em  Street addres  Canton	e is the property?  Herald Avenue NE  Is, if available, or other description  OH 44	721-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	Current entire p  Describ (such a	event of any secured by the Have Claim value of the property?  \$156,900.00  The the nature of yes fee simple, tens	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
Yes. Where  1  8062 Em  Street addres  Canton	e is the property?  Herald Avenue NE  Is, if available, or other description  OH 44	721-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	Current entire p  Describ (such a	evalue of the roperty?  \$156,900.00  the the nature of yes fee simple, tenstate), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$156,900.0  our ownership interest
Yes. Where  1 8062 Em Street addres  Canton	e is the property?  Herald Avenue NE  Is, if available, or other description  OH 44	721-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current entire p  Describ (such a a life es	evalue of the roperty?  \$156,900.00  the the nature of yes fee simple, tenstate), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$156,900.0  our ownership interest
Yes. Where  1 8062 Em Street addres  Canton City	e is the property?  Herald Avenue NE  Is, if available, or other description  OH 44	721-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current entire p  Describ (such a a life es  Fee si	evalue of the roperty?  \$156,900.00  the the nature of yes fee simple, tenstate), if known.	current value of the portion you own? \$156,900.0  our ownership interest ancy by the entireties, of
Yes. Where  8062 Em  Street addres  Canton  City	e is the property?  Herald Avenue NE  Is, if available, or other description  OH 44	721-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current entire p  Describ (such a a life es  Fee si	evalue of the property?  \$156,900.00  The the nature of yes fee simple, tensetate), if known.  Simple  The compensation of the state of	current value of the portion you own? \$156,900.0  our ownership interest ancy by the entireties, of
Yes. Where  1 8062 Em  Street addres  Canton  City  Stark	e is the property?  Herald Avenue NE  Is, if available, or other description  OH 44	721-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this	Current entire p  Describ (such a a life es  Fee si	evalue of the property?  \$156,900.00  The the nature of yes fee simple, tensetate), if known.  Simple  The compensation of the state of	current value of the portion you own? \$156,900.0  our ownership interest ancy by the entireties, of

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debt Debt		Maurice Ligg Debra Liggin	•		Case number (if known)	
3. <b>C</b> a	ars, vans	, trucks, tract	ors, sport utility ve	hicles, motorcycles		
	No					
_	Yes					
	100					
3.1	Make:	Ford		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Econoline	<u> </u>	Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	1992		■ Debtor 2 only		
		mate mileage:	160000	☐ Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
		formation:		☐ At least one of the debtors and another		. ,
					4	
				Check if this is community property	\$500	.00 \$500.00
				(see instructions)		
		01 1			Do not doduct soci	ured claims or exemptions. Put
3.2	Make:	Chrysler		Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Town & C	ountry	Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2009	115000	Debtor 2 only	Current value of t	
		mate mileage:  formation:	115000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Other in	iioiiiatioii.		At least one of the debtors and another		
				☐ Check if this is community property	\$8,000	.00 \$8,000.00
				(see instructions)		
				rn for all of your entries from Part 2, including		\$8,500.00
-					ļ	
Part :	3: Descri	ibe Your Perso	nal and Household Ite	ems		
Do y	ou own	or have any le	egal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ε		l <b>goods and f</b> e Major applian	urnishings ces, furniture, linens	, china, kitchenware		
	Yes. De	escribe				
						40,000,00
			Household Goo	ds and Furnishings		\$2,000.00
	ectronics xamples:	Televisions ar	· · ·	eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners; music co	ollections; electronic devices
	No Yes. De	escribe		. ,		
8. <b>C</b> r	ollectible	s of value				
E	xamples:	Antiques and	figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or other llectibles	r art objects; stamp, coin,	or baseball card collections;
_	No Yes. De	escribe				

Debtor 1 Debtor 2	Maurice Liggins Debra Liggins	Case number (if known)	
	nent for sports and hobbies  les: Sports, photographic, exercise, and othe musical instruments	r hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	. Describe		
■ No	ples: Pistols, rifles, shotguns, ammunition, ar	nd related equipment	
	Describe		
□ No	ples: Everyday clothes, furs, leather coats, de	esigner wear, shoes, accessories	
■ Yes	Describe		
	Clothing		\$500.00
■ No □ Yes		gagement rings, wedding rings, heirloom jewelry, watches, gems, g	gold, silver
	. Describe ther personal and household items you di	d not already list, including any health aids you did not list	
■ No □ Yes	. Give specific information		
	the dollar value of all of your entries from Part 3. Write that number here	Part 3, including any entries for pages you have attached	\$2,500.00
Part 4: D	escribe Your Financial Assets		
Do you o	wn or have any legal or equitable interest	in any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
■ No	oples: Money you have in your wallet, in your l	home, in a safe deposit box, and on hand when you file your petiti	on
	sits of money uples: Checking, savings, or other financial ac institutions. If you have multiple accoun	counts; certificates of deposit; shares in credit unions, brokerage ats with the same institution, list each.	houses, and other similar
□ No ■ Yes		Institution name:	
	17.1. <b>Checking</b>	CSE Federal Credit Union	\$5.00
	17.2. <b>Savings</b>	CSE Federal Credit Union	\$5.00

		ice Liggins a Liggins		Case number (if known)	
		17.3.	Savings	Stark FCU	\$5.00
		17.4.	Savings	Stark FCU	\$5.00
		17.5.	Checking	CSE Federal Credit Union	\$5.00
		17.6.	Savings	CSE Federal Credit Union	\$5.00
		17.7.	Savings	St. Josephs FCU	\$5.00
18.			cly traded stocks ent accounts with b	prokerage firms, money market accounts	
	☐ Yes		Institution or issue	r name:	
19.	joint venture ■ No	ecific information	about themene of entity:	porated and unincorporated businesses, including an interest in an LLC % of ownership:	ટે, partnership, and
20.	Negotiable inst Non-negotiable  No	truments include pe instruments are	personal checks, ca those you cannot to	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	☐ Yes. Give spe	ecific information a	about them uer name:		
21.	Examples: Inte	pension account erests in IRA, ERIS h account separat	SA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing plans	
	L 103. List caci		of account:	Institution name:	
22.	Your share of a		ts you have made s	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companies, or othe	ers
	Yes			Institution name or individual:	
23.	Annuities (A co	ontract for a period	dic payment of mor	ney to you, either for life or for a number of years)	
	■ No □ Yes	Issuer nam	e and description.		
24.	Interests in an		n an account in a	qualified ABLE program, or under a qualified state tuition program.	
	■ No □ Yes			on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	■ No	ole or future inte		other than anything listed in line 1), and rights or powers exercisable fo	or your benefit
	ites. Give sp	ecine imormation	about trieffi		

	ebtor 1 ebtor 2	Maurice Liggins Debra Liggins	Case number (if known)	
	Examp ■ No	, copyrights, trademarks, trade secrets, and ot les: Internet domain names, websites, proceeds fr		
	Examp ■ No	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperations of the specific information about them	ive association holdings, liquor licenses, professional licenses	
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you  Give specific information about them, including wh	ether you already filed the returns and the tax years	
	■ No		ort, child support, maintenance, divorce settlement, property se	ettlement
	Examp  ■ No	mounts someone owes you les: Unpaid wages, disability insurance payments, benefits; unpaid loans you made to someone Give specific information	disability benefits, sick pay, vacation pay, workers' compensatelse	ation, Social Security
	Examp ■ No	•	ings account (HSA); credit, homeowner's, or renter's insurance	9
	⊔ Yes. I	Name the insurance company of each policy and li Company name:	ist its value. Beneficiary:	Surrender or refund value:
	If you a someon	erest in property that is due you from someone re the beneficiary of a living trust, expect proceeds he has died.  Give specific information	e who has died s from a life insurance policy, or are currently entitled to receiv	e property because
33.	Examp ■ No	against third parties, whether or not you have les: Accidents, employment disputes, insurance cl Describe each claim		
34.	■ No	ontingent and unliquidated claims of every nat	ture, including counterclaims of the debtor and rights to s	et off claims
	■ No	ancial assets you did not already list Give specific information		
36			i, including any entries for pages you have attached	\$35.00
Pa	rt 5: Des	cribe Any Business-Related Property You Own or Ha	Ive an Interest In. List any real estate in Part 1.	

Official Form 106A/B

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page 5
Best Case Bankruptcy

Schedule A/B: Property

Debtor 1 Debtor 2	Maurice Liggins Debra Liggins		Case number (if known)	
37. <b>Do you</b>	own or have any legal or equitable interest in any business-relate	ed property?		
No. G	to to Part 6.			
☐ Yes. (	Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
	u own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
■ No.	. Go to Part 7.			
☐ Yes	s. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	u have other property of any kind you did not already list?  sples: Season tickets, country club membership	•		
■ No				
☐ Yes.	. Give specific information			
54. <b>Add</b>	the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Part</b>	1: Total real estate, line 2			\$156,900.00
56. <b>Part</b>	2: Total vehicles, line 5	\$8,500.00		
	3: Total personal and household items, line 15	\$2,500.00		
	4: Total financial assets, line 36	\$35.00		
	5: Total business-related property, line 45	\$0.00		
	6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Part</b>	7: Total other property not listed, line 54 +	\$0.00		
62. Total	I personal property. Add lines 56 through 61	\$11,035.00	Copy personal property total	\$11,035.00
63. Total	l of all property on Schedule A/B. Add line 55 + line 62			\$167 935 00

Fill in this inforr	Fill in this information to identify your case:							
Debtor 1	Maurice Liggins							
	First Name	Middle Name	Last Name					
Debtor 2	Debra Liggins							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO					
Case number								
(if known)					Check if this is an			
					amended filing			
-					ğ			

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	ptions are	you claiming?	Check one only	even if	vour spouse is	s filina with	vou.
----	--------------------	------------	---------------	----------------	---------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	ount of the exemption you claim	Specific laws that allow exemption
Household Goods and Furnishings Line from <i>Schedule A/B</i> : <b>6.1</b>	\$2,000.00	\$2,000.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Clothing Line from Schedule A/B: 11.1	\$500.00	\$500.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Checking: CSE Federal Credit Union Line from Schedule A/B: 17.1	\$5.00	\$5.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
Savings: CSE Federal Credit Union Line from Schedule A/B: 17.2	\$5.00	\$5.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
Savings: Stark FCU Line from Schedule A/B: 17.3	\$5.00	\$5.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

	otor 2 Debra Liggins  Debra Liggins			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B  Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption		
				eck only one box for each exemption.		
	Savings: Stark FCU Line from Schedule A/B: 17.4	\$5.00		\$5.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
LI	Ellie Holli Genedale Av.B. 1114			100% of fair market value, up to any applicable statutory limit	2323.00(A)(3)	
	Checking: CSE Federal Credit Union Line from Schedule A/B: 17.5	\$5.00		\$5.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	Lille Holli Schedule AVB. 17.3			100% of fair market value, up to any applicable statutory limit	2329.00(A)(3)	
	Savings: CSE Federal Credit Union Line from Schedule A/B: 17.6	\$5.00		\$5.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	Ellie IIIIII Schedule AVB. 17.0			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)	
	Savings: St. Josephs FCU Line from Schedule A/B: 17.7	\$5.00		\$5.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	Ellie Irom Goriodale 7VB.			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(0)	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			, , , , , , , , , , , , , , , , , , ,	nt.)	
	■ No					
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No					

Yes

Fill in this informs						
Fill in this informa	ntion to identify you					
Debtor 1	Maurice Liggins First Name	Middle Name Last Name				
Debtor 2	Debra Liggins	ivildule Name Last Name				
(Spouse if, filing)	First Name	Middle Name Last Name		-		
United States Bank	ruptcy Court for the:	NORTHERN DISTRICT OF OHIO				
0				-		
Case number				☐ Check	if this is an	
					led filing	
~						
Official Form						
Schedule D	D: Creditors	Who Have Claims Secure	ed by Propert	У	12/15	
		If two married people are filing together, both are out, number the entries, and attach it to this form.				
number (if known).	taditional Fago, III It	out, number the charles, and attach it to the form	on the top of any addition	nai pagoo, mno your na		
1. Do any creditors ha	ave claims secured by	your property?				
□ No. Check the control of the c	his box and submit t	nis form to the court with your other schedules.	You have nothing else t	to report on this form.		
■ Yes. Fill in a	all of the information	below.				
Part 1: List All	Secured Claims					
2. List all secured cla	aims. If a creditor has r	more than one secured claim, list the creditor separat	ely Column A	Column B	Column C	
		a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion If any	
	·	·	value of collateral.	claim		
2.1 Aultman Ho	ospital	Describe the property that secures the claim:	\$7,751.00	\$156,900.00	\$0.00	
Creditor's Name		8062 Emerald Avenue NE Canton, OH 44721 Stark County				
0000 01 41	04 4 0344	PPN: 5213176  As of the date you file, the claim is: Check all that				
2600 Sixth S Canton, OH		apply.				
	ity, State & Zip Code	☐ Contingent ☐ Unliquidated				
rumber, oncor, o	my, otato a zip oode	☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortgage or	secured			
Debtor 2 only		car loan)				
■ Debtor 1 and Debt	•	☐ Statutory lien (such as tax lien, mechanic's lien)				
At least one of the		Judgment lien from a lawsuit				
☐ Check if this clair community debt		Other (including a right to offset)				
Date debt was incurr	red <b>2017</b>	Last 4 digits of account number				
2.2 Carrington Services	Mortgage	Describe the property that secures the claim:	\$190,000.00	\$156,900.00	\$40,851.00	
Creditor's Name		8062 Emerald Avenue NE Canton,				
		OH 44721 Stark County				
		PPN: 5213176  As of the date you file, the claim is: Check all that				
P.O. Box 50 Westfield, II	-	apply.				
	ity, State & Zip Code	☐ Contingent ☐ Unliquidated				
rumber, direct, o	my, State & Zip Code	☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage or	secured			
Debtor 2 only		car loan)				
Debtor 1 and Debt		☐ Statutory lien (such as tax lien, mechanic's lien)				
At least one of the		Judgment lien from a lawsuit				
☐ Check if this clair community debt		Other (including a right to offset)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1 Maurice Liggins		Case number (if known)				
First Name Middle N	Name Last Name					
Debtor 2 Debra Liggins  First Name Middle N	Name Last Name					
i iist vaine i mude i	valle Last Ivalle					
Date debt was incurred 2015	Last 4 digits of account number					
2.3 CSE Federal Credit Union	Describe the property that secures the claim	n: \$9,463.00 \$8,000.00 \$1,463.00				
Creditor's Name	2009 Chrysler Town & Country 115000 miles					
1380 Market Avenue, N Canton, OH 44714	As of the date you file, the claim is: Check all the apply.  Contingent	that				
Number, Street, City, State & Zip Code	Unliquidated					
Who are the debte of	Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
☐ Debtor 1 only ☐ Debtor 2 only	<ul> <li>An agreement you made (such as mortgage car loan)</li> </ul>	e or secured				
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a	☐ Other (including a right to offset)					
community debt	— Other (morading a right to onset)					
Date debt was incurred	Last 4 digits of account number					
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	e: \$207,214.00				
If this is the last page of your form, add	the dollar value totals from all pages.	\$207,214.00				
Write that number here:		Ψ <b>2</b> 01,214.00				
Part 2: List Others to Be Notified for	or a Debt That You Already Listed					
trying to collect from you for a debt you o	owe to someone else, list the creditor in Part 1, at you listed in Part 1, list the additional creditor	nat you already listed in Part 1. For example, if a collection agency is , and then list the collection agency here. Similarly, if you have more brs here. If you do not have additional persons to be notified for any				
Name, Number, Street, City, State & Canton Municipal Court	Zip Code C	On which line in Part 1 did you enter the creditor? 2.1				
218 Cleveland Avenue SW	L	Last 4 digits of account number				
P.O. Box 24218		<u> </u>				
Canton, OH 44701						
Name, Number, Street, City, State &	Zip Code C	On which line in Part 1 did you enter the creditor? 2.1				
William Emley 4518 Fulton Road NW Canton, OH 44718		Last 4 digits of account number				

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill in th	his information	to identify your ca	ase:						
Debtor 1	1 <b>M</b> a	aurice Liggins							
		t Name	Middle Nan	ne	Last Name				
Debtor 2		bra Liggins							
(Spouse if,	, filing) Firs	t Name	Middle Nan	ne	Last Name				
United S	States Bankrupt	cy Court for the:	NORTHERN	DISTRICT OF C	OHIO				
Case nu	ımbor								
(if known)								□ Ch	eck if this is an
I								_ am	ended filing
Officia	al Form 10	GE/E							
				I	l Claima				40/45
		Creditors Wh							12/15 s. List the other party t
left. Attac	ch the Continuati d case number (i —	on Page to this page	. If you have no	information to re					es in the boxes on the onal pages, write your
		e priority unsecured							
	No. Go to Part 2.	c priority unscoured	olannis against	you.					
☐ Y Part 2:		our NONPRIORITY	Uncocured (	Naime					
		e nonpriority unsecu							
	-	ing to report in this par	_	-	h oth or ook	a dula a			
_	No. You have noth	ing to report in this par	n. Submit this to	rm to the court wit	n your other sch	edules.			
Y	es.								
unse	ecured claim, list the one creditor hold:	riority unsecured clai he creditor separately f s a particular claim, list	for each claim. F	or each claim liste	ed, identify what	type of claim it	is. Do not list claims	already inclu	ded in Part 1. If more
									Total claim
4.1	Acceptance	Now	L	ast 4 digits of ac	count number	xxxx			\$3,079.00
	Nonpriority Credit			•		0040		_	
	5501 Headqu Plano, TX 75		v	When was the del	ot incurred?	2018			
_		ity State Zlp Code		As of the date you	ı file, the claim	is: Check all th	nat apply		
	Who incurred th	e debt? Check one.							
	Debtor 1 only		[	☐ Contingent					
	■ Debtor 2 only		[	☐ Unliquidated					
	Debtor 1 and	Debtor 2 only	[	☐ Disputed					
	_	f the debtors and anoth	her <b>T</b>	ype of NONPRIO	RITY unsecure	d claim:			
	☐ Check if this	claim is for a commi	<sub>unity</sub> [	☐ Student loans					
	debt			Obligations aris	sing out of a sepa	aration agreem	ent or divorce that y	ou did not	
	Is the claim sub	ject to offset?		eport as priority cla		an plane!	than aimile		
	■ No			Debts to pensio		ng plans, and o	tner similar debts		
	☐ Yes			Other, Specify	Loan				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 12

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43172

Debtor Debtor	Maurice Liggins Debra Liggins		Case number (if known)				
4.2	AEP Ohio	Last 4 digits of account number	2010	\$1,800.00			
	Nonpriority Creditor's Name P.O. Box 24401	When was the debt incurred?	2017-2018				
	Canton, OH 44701  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	Пол					
	Debtor 2 only	☐ Unliquidated	☐ Contingent				
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	_	Student loans					
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Utility	· 				
4.3	AT&T	Last 4 digits of account number	4286	\$507.00			
	Nonpriority Creditor's Name P.O. Box 6416 Carol Stream, IL 60197	When was the debt incurred?	2018				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	•	,				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	-				
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Service					
4.4	Capital Recovery Systems	Last 4 digits of account number	8877	\$287.00			
	Nonpriority Creditor's Name 750 Cross Pointe Road Suite S	When was the debt incurred?	2018				
	Columbus, OH 43230						
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Court Fee					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 12

Cavalry Portfolio Services  Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$645.00
500 Summit Lake Dr. Suite 4A Valhalla, NY 10595	When was the debt incurred?	2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Collection		
CBSC	Last 4 digits of account number	Various	\$492.00
Nonpriority Creditor's Name 1225 North Main Street North Canton, OH 44720	When was the debt incurred?	2012	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other Specify Collection		
CMCS Premium Recovery	Last 4 digits of account number	1728	\$272.00
Nonpriority Creditor's Name  10192 Grand River Road	When was the debt incurred?	2018	
Suite 111			
Brighton, MI 48116-6531  Number Street City State Zlp Code	As of the date you file, the claim	in Charle all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	із. Спеск ан шасарріу	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Collection		

Schedule E/F: Creditors Who Have Unsecured Claims

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	r 1 Maurice Liggins r 2 Debra Liggins		Case number (if known)			
4.8	CSE Federal Credit Union	Last 4 digits of account number	xxxx	\$3,918.00		
	Nonpriority Creditor's Name 1380 Market Avenue, N Canton, OH 44714	When was the debt incurred?	2017			
	Number Street City State Zlp Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	$\square$ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Loan				
4.9	Debt Recovery Solutions	Last 4 digits of account number	xxxx	\$1,360.00		
	Nonpriority Creditor's Name 6800 Jericho Turnpike Suite 113E	When was the debt incurred?	2018			
	Syosset, NY 11791  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Collection				
4.1 0	DirecTV	Last 4 digits of account number	6510	\$419.00		
	Nonpriority Creditor's Name P.O. Box 5007 Carol Stream, IL 60197	When was the debt incurred?	2018			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	-				
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	a plane, and other similar dabta			
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts			
	☐ Yes	Other. Specify Service				

Schedule E/F: Creditors Who Have Unsecured Claims

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Debra Liggins		Case number (if known)	
Fidelity Collections	Last 4 digits of account number	xxxx	\$1,696.0
Nonpriority Creditor's Name 855 S. Sawburg Avenue	When was the debt incurred?	2013	
Suite 103 Alliance, OH 44601			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection		
Grass Master, Inc.	Last 4 digits of account number	3339	\$140.0
Nonpriority Creditor's Name	_		
P.O. Box 519	When was the debt incurred?	2018	
Canal Fulton, OH 44614  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,	one on an anat appry	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Service		
IC Systems	Last 4 digits of account number	xxxx	\$161.0
Nonpriority Creditor's Name P.O. Box 64378	When was the debt incurred?	2014	<u> </u>
Saint Paul, MN 55164			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	IS: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u ciaiiii.	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	aradon agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other Specify Collection		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debra Liggins		Case number (if known)	
IC Systems	Last 4 digits of account number	6510	\$419.00
Nonpriority Creditor's Name P.O. Box 64437 Saint Paul, MN 55164	When was the debt incurred?	2017	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Collection		
Jefferson Capital Systems	Last 4 digits of account number	xxxx	\$660.00
Nonpriority Creditor's Name			
16 McLeland Road Saint Cloud, MN 56303 Number Street City State Zlp Code	When was the debt incurred?	2015	
Who incurred the debt? Check one.	As of the date you file, the claim	ів: Спеск ан тат арріу	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Collection		
Lab Corp of America	Last 4 digits of account number	0060	\$413.00
Nonpriority Creditor's Name P.O. Box 2240	When was the debt incurred?	2018	*******
Burlington, NC 27216-2240  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	ne of the date yearne, the claim	or one an unit apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	ng pians, and other similar debts	
□Yes	Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

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Mercy Medical Center	Last 4 digits of account number	6311	\$575.00
Nonpriority Creditor's Name P.O. Box 951082	When was the debt incurred?	2018	
Cleveland, OH 44193  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical		
Midland Funding	Last 4 digits of account number	8718	\$30,897.00
Nonpriority Creditor's Name	_		
2365 Northside Drive Suite 300	When was the debt incurred?	2017	
San Diego, CA 92108			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Collection	g plans, and other similar debts	
	. ,		
Midwest Recovery Associates  Nonpriority Creditor's Name	Last 4 digits of account number	XXXX	\$699.00
2747 W. Clay Street, A Saint Charles, MO 63301	When was the debt incurred?	2018	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
debt		,,	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin		

Schedule E/F: Creditors Who Have Unsecured Claims

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Midwest Recovery Systems	Last 4 digits of account number	xxxx	\$2,419.00
Nonpriority Creditor's Name 514 Earth City Plaza Suite 100	When was the debt incurred?	2018	
Earth City, MO 63045			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Collection		
Modernpath, Inc.	Last 4 digits of account number	3173	\$30.00
Nonpriority Creditor's Name	_		******
5700 Southwyck Blvd. Toledo, OH 43614	When was the debt incurred?	2018	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Medical		
NCP Managament		VVVV	\$2,078.00
NCB Management Nonpriority Creditor's Name	Last 4 digits of account number		\$2,076.00
1 Allied Drive Feasterville Trevose, PA 19053	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u Julii	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Collection		

Schedule E/F: Creditors Who Have Unsecured Claims

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2 Debra Liggins		Case number (if known)	
Nicholas Financial	Last 4 digits of account number	xxxx	\$8,779.0
Nonpriority Creditor's Name 2454 N. McMullen Booth Rd.	When was the debt incurred?	2016	
Bldg. C Clearwater, FL 33759 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Repossess		
Di al la G		F000	407.4
Pinnacle Law Group  Nonpriority Creditor's Name	Last 4 digits of account number	5800	\$97.0
10153 1/2 Riverside Drive Suite 309	When was the debt incurred?	2018	
North Hollywood, CA 91602			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection		
Professsional Account		F704	
Management Nonpriority Creditor's Name	Last 4 digits of account number	5781	\$26.0
P.O. Box 1153 Milwaukee, WI 53201	When was the debt incurred?	2018	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	<u> </u>	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Fee		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debra Liggins		Case number (if known)	
Receivable Management Services	Last 4 digits of account number	xxxx	\$80.0
Nonpriority Creditor's Name 240 Emery Street Bethlehem, PA 18015	When was the debt incurred?	2017	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection		
Receivables Performance	Last 4 digits of account number	6083	\$2,138.0
Nonpriority Creditor's Name  20186 44th Avenue W	When was the debt incurred?	2018	
Lynnwood, WA 98036	mon was the dest mounted.	2010	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection		
RMCB	Last 4 digits of account number	9629	\$377.0
Nonpriority Creditor's Name P.O. Box 1235	When was the debt incurred?	2017	
Elmsford, NY 10523-0935  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other Specify Medical Co	H	

Schedule E/F: Creditors Who Have Unsecured Claims

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	Maurice Liggins Debra Liggins		Case number (if known)		
9	Stark County Emergency Physicians	Last 4 digits of account number	3105	\$669.00	
	Nonpriority Creditor's Name P.O. Box 20670 Canton, OH 44701-0670	When was the debt incurred?	2018		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical			
0	Stark County Emergency Physicians	Last 4 digits of account number	7394	\$225.00	
	Nonpriority Creditor's Name P.O. Box 20670	When was the debt incurred?	2017		
=	Canton, OH 44701-0670  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
,	Who incurred the debt? Check one.	•			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other Specify Medical			
4.3	Unity Health Network		6255	\$25.00	
	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ23.00	
	P.O. Box 640 Cuyahoga Falls, OH 44222	When was the debt incurred?	2018		
_	Number Street City State ZIp Code	As of the date you file, the claim			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	■ Other. Specify Medical			
		- Other. Specify			

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Maurice Liggins Debtor 2 Debra Liggins		Case number (if known)		
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Convergent Outsourcing P.O. Box 9004	Line <b>4.15</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims		
Renton, WA 98057		Part 2: Creditors with Nonpriority Unsecured Claims		
Roman, W. Cooo.	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?		
Diversified Consultants	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
P.O. Box 551268 Jacksonville, FL 32255		■ Part 2: Creditors with Nonpriority Unsecured Claims		
odersonvine, i E 32233	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Diversified Consultants	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
P.O. Box 551268 Jacksonville, FL 32255		Part 2: Creditors with Nonpriority Unsecured Claims		
odoksonvine, i E 32233	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?		
Northland Group	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
P.O. Box 390846 Minneapolis, MN 55439		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Willineapons, Wild 33439	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?		
Total Card, Inc.	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
5109 S. Broadband Lane Sioux Falls, SD 57108		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Sioux i alis, 3D 37 100	Last 4 digits of account number			

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	65,382.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	65,382.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Maurice Liggins			
	First Name	Middle Name	Last Name	
Debtor 2	Debra Liggins			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is an amended filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

1	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Olato	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u>—</u>
2.4			<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		State	ZIF Coue	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in this	s information to identify your	case:		
Debtor 1	Maurice Liggins			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fili	Debra Liggins  First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case num	nher			
(if known)				☐ Check if this is an amended filing
Codebtors people are fill it out, a your name	e filing together, both are equand number the entries in the e and case number (if known).  you have any codebtors? (If y	re also liable for any dek ally responsible for sup boxes on the left. Attacl . Answer every question	olying correct informat h the Additional Page t i.	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write as a codebtor.
Arizor ■ No. □ Yes	na, California, Idaho, Louisiana, b. Go to line 3. s. Did your spouse, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)  r if your spouse is filing with you. List the person shown
Form				sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to f
	Column 1: Your codebtor Name, Number, Street, City, State and ZII	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Chedule G, line ☐ Schedule G
	Number Street City	State	ZIP Code	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
-	Number Street City	State	ZIP Code	_

Fill	in this information to identify your	case:							
Deb	otor 1 Maurice Li	ggins			_				
	otor 2 Debra Ligg	ins			_				
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF OHIO		_				
(If kn	fficial Form 106l		-				ed filing nent showin as of the fo	ng postpetition ollowing date:	
	chedule I: Your Inc	ome				IVIIVI / DD/	1111		12/15
supp spot attac Par	plying correct information. If you use. If you are separated and you have separated and you have separated because the separate sheet to this form  The separate sheet to this form  The separate sheet shee	u are married and not filit our spouse is not filing w . On the top of any additi	ng jointly, and your sith you, do not inclu	spouse is	s living nation a	with you, inc about your sp	lude informouse. If mo	mation about ore space is i	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>☐ Employed</li><li>■ Not employed</li></ul>			☐ Employed  ■ Not employed			
	employers.  Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	Give Details About Mo	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to re	eport for a	any line	, write \$0 in th	e space. Ind	clude your nor	n-filing
-	u or your non-filing spouse have r e space, attach a separate sheet t		ombine the information	n for all e	mploye	rs for that pers	on on the li	ines below. If y	you need
					Fo	r Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$	0.00	+\$	0.00	
4	Calculate gross Income Add	ling 2 ± ling 3		4	\$	0.00	1 🕟	0.00	

Case number (if known)

					Fo	For Debtor 1			r Debtor 2 or n-filing spouse	
	Copy	line 4 here		4.	\$	0	.00	\$	0.00	
5.	List a	all payroll deductions:						_		_
	5a.	Tax, Medicare, and Social	Security deductions	5a.	\$	0	.00	\$	0.00	<b>)</b>
	5b.	Mandatory contributions		5b.	\$		.00	\$-	0.00	
	5c.	Voluntary contributions for	·	5c.	\$		.00	\$	0.00	
	5d.	Required repayments of r	•	5d.	\$		.00	\$-	0.00	_
	5e.	Insurance	ctirement rana louns	5e.	\$		.00	\$-	0.00	_
	5f.	Domestic support obligat	ions	5f.	\$ _		.00	\$_	0.00	
	5g.	Union dues		5g.	\$		.00	φ_	0.00	_
	5h.	Other deductions. Specify	•	5g. 5h	. –			+ \$	0.00	_
6.			d lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	· Ψ_ \$		.00	΄ Ψ_ \$	0.00	_
7.			me pay. Subtract line 6 from line 4.	7.	\$ \$		.00	\$_ \$	0.00	_
		-	• •	, .	Ψ -		.00	Ψ_	0.00	<u>,                                     </u>
8.	List a	<b>profession, or farm</b> Attach a statement for each	eceived: operty and from operating a business, property and business showing gross ssary business expenses, and the total	8a.	\$	0	00	\$	0.00	
	8b.	Interest and dividends		8b.	\$-		.00	\$ \$		_
	8c.		that you, a non-filing spouse, or a dep		Φ_	U	.00	Φ_	0.00	<u>)</u>
	00.	regularly receive	pport, child support, maintenance, divorce		\$	0	.00	\$	0.00	)
	8d.	Unemployment compensa		8d.	\$		.00	\$	0.00	_
	8e.	Social Security		8e.	\$	1,405		\$	740.00	
	8f.	Include cash assistance and	Ince that you regularly receive d the value (if known) of any non-cash ass od stamps (benefits under the Supplemer m) or housing subsidies.		\$	·	.00	\$	0.00	)
	8g.	Pension or retirement inc	ome	8g.	\$	3,916	.00	\$	0.00	)
	8h.	Other monthly income. Sp	pecify:	8h	+ \$ -	0	.00	+ \$ _	0.00	<u> </u>
					_			_		_
9.	Add	all other income. Add lines	8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	5,321	.00	\$_	740.0	00
10.	Calc	ulate monthly income. Add	line 7 + line 9.	10. \$	;	5,321.00	+ \$		740.00 = \$	6,061.00
			or 1 and Debtor 2 or non-filing spouse.				-		-	.,
11.	Inclu- other	de contributions from an unm friends or relatives. ot include any amounts alrea	ions to the expenses that you list in So arried partner, members of your househo dy included in lines 2-10 or amounts that	ld, your deper						0.00
12.		that amount on the Summar	mn of line 10 to the amount in line 11. y of Schedules and Statistical Summary of				. ,		e. 12. \$	6,061.00
									Comb	
13.	Do y	No.	ecrease within the year after you file th	is form?					month	lly income
		Yes. Explain:								

Debtor 1 Maurice Liggins Debtor 2 Debra Liggins Debtor 2 Debra Liggins Spoake, filling) United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO  Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Is this a joint case? No. Go to line 2. Yes, Does Debtor 2 live in a separate household? Yes, Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not state the dependents?  Do not state the dependents names.  Granddaughter  To limit the supplicable date. Include expenses and pour dependents? No cypenses as of a date after the barkruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L).  The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4. The rental or home ownership expenses for your residence. Include first mortgage appropriate home maintenance, repair, and upkeep expenses. 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4. Real estate taxes 4. Property, homewomer's, or rental's insurance 4. See a state taxes 4. Depote the maintenance, repair, and upkeep expenses 4. Supplies the property homewomer's, or rental's insurance 4. See a state taxes 4. Depote the maintenance, repair, and upkeep expenses 5. Additional more applies and the property homewomer's and the property homewomer's and the property homewomer's and the prope	Fill	in this informa	ation to identify yo	our case:			l						
Debru 2   Debra Liggins   An amended filing   An applement showing postpetition chapter (Spouse, if illing)   United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO   MM / DD / YYYY	Deb	tor 1	Maurice Ligo	gins			Check	c if this is:					
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO    Official Form 106J		Don't Ligging						<ul><li>☐ An amended filing</li><li>☐ A supplement showing postpetition chap</li></ul>					
Case number ((If known))  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part Is: Describe Your Household  Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. One of this potent of the good of the potential of the good of the potential of the good of good of the good of the good of good of the good of go	``		. 0 . (	. NODTI	IEDN DISTDICT OF OUR	0	_	<u> </u>					
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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part     Describe Your Household     No													
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Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  150.00  4d. Homeowner's association or condominium dues	Par	t 2: Estim	nate Your Ongoi	ng Month	y Expenses								
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4d. Homeowner's association or condominium dues 4d. \$ 0.00				s, or renter	's insurance								
	5					ome equity loans							

**Maurice Liggins** Debtor 1 Debtor 2 Debra Liggins Case number (if known) **Utilities:** Electricity, heat, natural gas 6a. \$ 6a. 630.00 6b. \$ 6b. Water, sewer, garbage collection 100.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 480.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 740.00 Childcare and children's education costs 8. \$ 100.00 Clothing, laundry, and dry cleaning 9. \$ 150.00 10. Personal care products and services 10. \$ 150.00 11. Medical and dental expenses 11. \$ 200.00 12. Transportation. Include gas, maintenance, bus or train fare. 400.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 200.00 14. Charitable contributions and religious donations 14. \$ 250.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 252.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. \$ 387.00 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 0.00 20a. \$ 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 5,739.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 5,739.00 Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 6,061.00 23b. Copy your monthly expenses from line 22c above. 23b. -\$ 5,739.00 23c. Subtract your monthly expenses from your monthly income. 322.00 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ☐ No. Explain here: Debtors will need to purchase another vehicle within the next year and expect a payment of Yes. \$300-\$400.

Fill in this inforr	nation to identify your	case:		
Debtor 1	Maurice Liggins			
	First Name	Middle Name	Last Name	
Debtor 2	Debra Liggins			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number _				☐ Check if this is an
,				amended filing
You must file this	s form whenever you fi	le bankruptcy schedules n connection with a bank		ation.  alse statement, concealing property, or possible 5250,000, or imprisonment for up to 20
Sigr	n Below			
Did you pa	y or agree to pay some	one who is NOT an attori	ney to help you fill out bankruptcy	orms?
■ No				
☐ Yes. N	Name of person			tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
	lty of perjury, I declare e true and correct.	that I have read the sumi	mary and schedules filed with this	declaration and
	ırice Liggins		X /s/ Debra Liggins	
	re <b>Liggins</b> re of Debtor 1		<b>Debra Liggins</b> Signature of Debtor 2	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Date December 5, 2018

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Date December 5, 2018

Best Case Bankruptcy

Fill	in this infor	mation to identify you	r case:			
Del	btor 1	Maurice Liggins	1			
_	h ( O	First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	Debra Liggins First Name	Middle Name	Last Name		
Uni	ited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	r of ohio		
	se number nown)					Check if this is an amended filing
St	as complete	t of Financial	ible. If two married people	iduals Filing for E e are filing together, both are to this form. On the top of are	e equally responsible for s	
		n). Answer every que			,	
Pai	rt 1: Give	Details About Your Ma	arital Status and Where Y	ou Lived Before		
1.	What is you	ır current marital statı	ıs?			
	■ Married □ Not ma					
2.	During the	last 3 years, have you	lived anywhere other tha	n where you live now?		
	■ No □ Yes. Li	st all of the places you	ived in the last 3 years. Do	not include where you live no	N.	
	Debtor 1 P	rior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
<b>3.</b> state				egal equivalent in a commu Nevada, New Mexico, Puerto R		
	■ No □ Yes. M	ake sure you fill out <i>Sc</i>	hedule H: Your Codebtors (	Official Form 106H).		
Pai	rt 2 Expla	in the Sources of You	ır Income			
4.	Fill in the tot	al amount of income yo	u received from all jobs and	ting a business during this y d all businesses, including par vive together, list it only once u	t-time activities.	lendar years?
	■ No □ Yes. Fi	II in the details.				
			Debter		D-110	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Best Case Bankruptcy

Debtor 2		aurice Ligç bra Liggir				Case	e number (if known)		
Incl and	ude ind other	come regard public benef	less of wheth it payments;	e during this year or the tw er that income is taxable. Ex pensions; rental income; inte e and you have income that	camples of erest; divid	f <i>other income</i> are a lends; money collec	ted from lawsuits;	royalties; an	
List	each s	source and t	he gross inco	me from each source separa	ately. Do r	not include income th	nat you listed in lin	e 4.	
	No								
		Fill in the de	tails.						
				Debter 4			Dobtor 2		
				Debtor 1 Sources of income Describe below.	each	s income from source re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
		/ 1 of currei filed for bar	nt year until kruptcy:	Social Security Benefits		\$14,050.00	Social Securi Benefits	ty	\$3,700.00
				Retirement Income		\$39,160.00			
		dar year: December	31, 2017 )	Social Security Benefits		\$16,692.00			
				Retirement Income		\$46,992.00			
		dar year be December		Social Security Benefits		\$16,692.00			
				Retirement Income		\$46,992.00			
Part 3:	List	t Certain Pa	yments You	Made Before You Filed for	Bankrup	tcy			
6. Are □	eithei No.	Neither De	btor 1 nor D	s debts primarily consume ebtor 2 has primarily cons personal, family, or househo	umer deb	ots. Consumer debts	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the	90 days befo	re you filed for bankruptcy, c	lid you pa	y any creditor a tota	of \$6,425* or mor	re?	
		□ Yes	List below e	each creditor to whom you pa editor. Do not include payme	nts for do	mestic support oblig			
		* Subject		payments to an attorney for on 4/01/19 and every 3 year			or after the date o	f adjustment	
	Yes.			r both have primarily cons re you filed for bankruptcy, o			of \$600 or more?		
		■ No.	Go to line 7						
		□ Yes	include pay	each creditor to whom you pa ments for domestic support of this bankruptcy case.					
Cre	editor'	s Name and	l Address	Dates of paymo	ent	Total amount paid	Amount you still owe	Was this p	payment for
						pulu	Juli Owe		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 2 Debra Liggins		Cas	se number (if known)		
	Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general pof which you are an officer, director, person a business you operate as a sole proprietor. alimony.	partners; relatives of any ge in control, or owner of 20%	neral partners; partners or more of their voting	erships of which yo g securities; and ar	u are a genera ny managing ag	I partner; corporations gent, including one for
	■ No					
	Yes. List all payments to an insider.				_	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	any property on a	ccount of a de	bt that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment tor's name
Par	t 4: Identify Legal Actions, Repossession	ons, and Foreclosures				
	modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number	Nature of the case	Court or agency		Status of the	e case
	Within 1 year before you filed for bankrup		perty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?
	Check all that apply and fill in the details below	OW.				
	No. Go to line 11.					
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	ed			
	Nicholas Financial 2454 N. McMullen Booth Rd. Bldg. C	2013 Chevrolet Mal  ■ Property was repose		2018		\$12,000.00
	Clearwater, FL 33759	☐ Property was forecle				
		☐ Property was garnis				
		☐ Property was attach				
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be  No  Yes. Fill in the details.		cluding a bank or fir	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action th	e creditor took		action was	Amount
				taken		
	court-appointed receiver, a custodian, or		perty in the possess	ion of an assigne	e for the bene	fit of creditors, a
	No					
	☐ Yes					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

10.	□ No ■ Yes. Fill in the details.  Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Lake Legal Services, LLC 4450 Belden Village Street NW Suite 804 Canton, OH 44718 www.ohiobankruptcyrelief.com  Debtorcc.org	Description and value of any property transferred  Attorney Fee  Credit Counseling	Date payment or transfer was made  November 2018	Amount of payment \$699.00
10.	□ No ■ Yes. Fill in the details.  Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Lake Legal Services, LLC 4450 Belden Village Street NW Suite 804 Canton, OH 44718	Description and value of any property transferred	Date payment or transfer was made	payment
10.	□ No ■ Yes. Fill in the details.  Person Who Was Paid Address Email or website address	Description and value of any property	Date payment or transfer was	
10.	□ No	arers, or credit counseling agencies for services require	d in your bankruptcy.	
10.		arers, or credit counseling agencies for services require	d in your bankruptcy.	
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition prep			rty to anyone you
Pai	t 7: List Certain Payments or Transfers			
	how the loss occurred	escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	■ No □ Yes. Fill in the details.			
		y or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
Pai	Address (Number, Street, City, State and ZIP Code)  t 6: List Certain Losses			
	Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what you contributed	Dates you contributed	Value
14.	Within 2 years before you filed for bankrupt  ■ No  □ Yes. Fill in the details for each gift or cont	cy, did you give any gifts or contributions with a tota ribution.	al value of more than	\$600 to any charity?
	Person to Whom You Gave the Gift and Address:			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
13.	■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	nan sooo per person	f
12		ov did you give any gifts with a total value of mare t	han \$600 par parsan	2
Pai	otor 2 Debra Liggins			
Par		Case number	(if known)	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you list	or to make payments			or transfer any proper	ty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
	Marie Company of the					
<ul> <li>Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other that transferred in the ordinary course of your business or financial affairs?         Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your proinclude gifts and transfers that you have already listed on this statement.     </li> <li>No</li> </ul>						
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and va property transferre			any property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.		/ property to a	self-settled tr	ust or similar device o	f which you are a
	Name of trust	Description and va	alue of the prop	erty transferr	ed	Date Transfer was
		2000			<b>.</b>	made
Par	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankruptcy, we sold, moved, or transferred? Include checking, savings, money market, or of houses, pension funds, cooperatives, association No  Yes. Fill in the details.	ther financial accoun	ts; certificates	of deposit; sh		, ,
		est 4 digits of count number	Type of account instrument	clo mo	nte account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, an	y safe deposi	t box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or p	lace other than your	home within 1	year before yo	ou filed for bankruptc	y?
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it?		Describe the	contents	Do you still have it?
		Address (Number, St State and ZIP Code)	reet, City,			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Maurice Liggins
Debtor 2 Debra Liggins

Case number (if known)

Par	t 9:	Identify Property You Hold or Control for	Someone Else					
23.		you hold or control any property that someo someone.	one else owns? Include any proper	ty y	ou borrowed from, are storing fo	r, or hold in trust		
		No						
		Yes. Fill in the details.						
		vner's Name Idress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value		
Par	t 10	Give Details About Environmental Information	ation					
For	the	purpose of Part 10, the following definitions	apply:					
_	tox reg	vironmental law means any federal, state, or ic substances, wastes, or material into the a ulations controlling the cleanup of these sul	ir, land, soil, surface water, ground bstances, wastes, or material.	dwat	er, or other medium, including s	tatutes or		
		e means any location, facility, or property as own, operate, or utilize it, including disposal		law,	whether you now own, operate,	or utilize it or used		
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	ort a	all notices, releases, and proceedings that yo	ou know about, regardless of wher	n the	ey occurred.			
24.	Has	s any governmental unit notified you that you	u may be liable or potentially liable	unc	der or in violation of an environm	ental law?		
		No						
		Yes. Fill in the details.						
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.	Hav	ve you notified any governmental unit of any	release of hazardous material?					
		No						
		Yes. Fill in the details.						
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
26.	Hav	ve you been a party in any judicial or adminis	strative proceeding under any envi	ironi	mental law? Include settlements	and orders.		
		No Yes. Fill in the details.						
	Ca	se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11	Give Details About Your Business or Con	,					
27.	Wit	— hin 4 years before you filed for bankruptcy, o	did vou own a husiness or have an	w of	the following connections to an	v husinass?		
21.	VVII	☐ A sole proprietor or self-employed in a t	•	-	-	y business:		
		☐ A member of a limited liability company			·			
		☐ A member of a minited hability company ☐ A partner in a partnership	(LLO) or minited natinity partiters in	ıp (L	-L1 <i>)</i>			
			tive of a corporation					
		☐ An officer, director, or managing execut	-					
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debto Debto	00	Ca	ase number (if known)
	No. None of the above applies. Go to Yes. Check all that apply above and fi	Part 12. ill in the details below for each business.	
7	Business Name Address Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
	rithin 2 years before you filed for bankrup stitutions, creditors, or other parties.  No Yes. Fill in the details below.	otcy, did you give a financial statement to a	nyone about your business? Include all financial
-	lame Address Number, Street, City, State and ZIP Code)	Date Issued	
I have are tru with a	e and correct. I understand that making		declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both.
/s/ M	aurice Liggins	/s/ Debra Liggins	
	ice Liggins ture of Debtor 1	Debra Liggins Signature of Debtor 2	
Date	December 5, 2018	Date December 5, 2018	
Did yo ■ No □ Yes	, ,	nent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did yo ■ No □ Yes	u pay or agree to pay someone who is no	ot an attorney to help you fill out bankruptc	y forms?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this infor	mation to identify your	case:		
Debtor 1	Maurice Liggins			
	First Name	Middle Name	Last Name	
Debtor 2	Debra Liggins			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number (if known)				☐ Check if this is an amended filing

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's Aultman Hospital	☐ Surrender the property.	□ No	
Description of <b>8062 Emerald Avenue NE</b>	<ul> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> </ul>	■ Yes	
property Canton, OH 44721 Stark County PPN: 5213176	Retain the property and [explain]:  avoid lien using 11 U.S.C. § 522(f)		
Creditor's Carrington Mortgage Services name:	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No	
Description of property securing debt: 8062 Emerald Avenue NE Canton, OH 44721 Stark County PPN: 5213176	<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	☐ Yes	
Creditor's CSE Federal Credit Union	☐ Surrender the property.	■ No	
Description of property  2009 Chrysler Town & Country 115000 miles	<ul> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul>	☐ Yes	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

	Maurice Liggins Debra Liggins	Case number (if known)	
securing o	debt:		_
or any unex	nation below. Do not list real estate leases	ses sted in Schedule G: Executory Contracts and Unexpire . Unexpired leases are leases that are still in effect; the e if the trustee does not assume it. 11 U.S.C. § 365(p)(	e lease period has not yet ended.
Describe yo	our unexpired personal property leases		Will the lease be assumed?
Lessor's nar	ne:		□ No
Description of	of leased		
Property:			☐ Yes
Lessor's nar			□ No
Description of Property:	of leased		☐ Yes
			Li res
Lessor's nar			□ No
Description of Property:	of leased		☐ Yes
			Li Tes
Lessor's nan			□ No
Description of Property:	of leased		☐ Yes
, ,			163
Lessor's nan			□ No
Description o Property:	orleased		☐ Yes
			<b>—</b> 100
Lessor's nan			□ No
Description o Property:	oi leased		☐ Yes
Lessor's nar Description (			□ No
Property:	oi leaseu		☐ Yes
Part 3: Si	gn Below		
	ty of perjury, I declare that I have indicated t is subject to an unexpired lease.	d my intention about any property of my estate that se	cures a debt and any personal
X /s/ Ma	urice Liggins	X /s/ Debra Liggins	
Mauri	ce Liggins	Debra Liggins	
Signatu	ire of Debtor 1	Signature of Debtor 2	
Date	December 5, 2018	Date December 5, 2018	

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

Fill in this information to identify your case:  Debtor 1  Debtor 2  (Spouse, if filing)  Lipited States Bankruptcy Court for the: Northern District of Ohio  Check one box only as directed in this form and in Form 122A-1Supp:  1. There is no presumption of abuse  □ 2. The calculation to determine if a presumption of a presumpt	
Debtor 1  Debtor 2  (Spouse, if filing)  Lipited States Rapkrupter Court for the: Northern District of Objective 1  Maurice Liggins  1. There is no presumption of abuse  2. The calculation to determine if a presumption of a pre	
(Spouse, if filing)  Lipited States Rapkrupter Court for the: Northern District of Object.	
United States Bankruptcy Court for the:  Northern District of Ohio  Posterior District of Ohio  Case number  Northern District of Ohio  Northern District of Ohio  applies will be made under Chapter 7 Means Te Calculation (Official Form 122A-2).	
(if known)  3. The Means Test does not apply now because of qualified military service but it could apply later.	
☐ Check if this is an amended filing	
Official Form 122A - 1	
Chapter 7 Statement of Your Current Monthly Income	12/15
Chapter 7 Statement of Tour Current Monthly Income	12/13
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is neede attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your nar case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because qualifying military service, complete and file <i>Statement of Exemption from Presumption of Abuse Under</i> § 707(b)(2) (Official Form 122A-1Supp) with this form 122A-1Supp) are Calculate Your Current Monthly Income	ne and of
What is your marital and filing status? Check one only.	
□ Not married. Fill out Column A, lines 2-11.	
■ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.	
☐ Married and your spouse is NOT filing with you. You and your spouse are:	
☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.	
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare a penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse a living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).	
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied d the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.	uring
Column A Column B  Debtor 1 Debtor 2 or non-filing spouse	
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). \$ 0.00 \$	
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \$\$\$	
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  \$	
5. Net income from operating a business, profession, or farm	
Debtor 1	
Gross receipts (before all deductions)  S  Ordinary and necessary operating expenses  -\$  0.00	
Net monthly income from a business, profession, or farm \$0.00 Copy here -> \$0.00 \$000 6. Net income from rental and other real property	

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

Debtor 1 0.00

0.00 Copy here -> \$

0.00

0.00

\$

0.00

\$ **-**\$

page 1

Best Case Bankruptcy

0.00

0.00

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

a Liggins Case number (if known)

					Column A Debtor 1		Column B Debtor 2 o non-filing	
8.	Unemp	loyment compensation			\$	0.00	\$	0.00
		enter the amount if you contend that the amount al Security Act. Instead, list it here:	received was a be	nefit under				
	For y	ou\$		0.00				
		our spouse \$		0.00				
9.	Pension	n or retirement income. Do not include any amunder the Social Security Act.	ount received that	was a	\$3	,915.00	\$	0.00
10.	Do not i		ecurity Act or payr nanity, or internation separate page and	nents nal or	\$	0.00	\$	0.00
	•				¢	0.00	\$	0.00
		Total amounts from separate pages, if any.			\$		\$ \$	
		Total amounts from separate pages, if any.		+	Ψ	0.00	Ψ	0.00
11.		te your total current monthly income. Add lin lumn. Then add the total for Column A to the tot		\$	3,915.00	+	0.00	= \$ 3,915.00
								Total current monthly income
Part	2: [	Determine Whether the Means Test Applies to	You					
12.	Calcula	te your current monthly income for the year.	Follow these steps	3:				
	12a. Co	py your total current monthly income from line 1	1		Сор	y line 11 l	nere=>	\$3,915.00_
	Mu	Itiply by 12 (the number of months in a year)						<b>x</b> 12
	12b. Th	e result is your annual income for this part of the	form				12b	5. <b>46,980.00</b>
13.	Calcula	te the median family income that applies to y	ou. Follow these s	steps:				
	Fill in th	e state in which you live.	ОН					
	Fill in th	e number of people in your household.	3					
		e median family income for your state and size of		L appoified	in the conor	oto inotruo	13.	\$73,182.00
		a list of applicable median income amounts, go of orm. This list may also be available at the bankr			iii iiie sepal	ate ilibiliuo	autio	
14.	How do	the lines compare?						
	14a.	Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1	, check box	1, There is	no presun	nption of abus	ee.
	14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	f page 1, check bo	x 2, The pr	esumption o	of abuse is	determined b	y Form 122A-2.
Part	3: 8	sign Below						
	Ву	signing here, I declare under penalty of perjury	that the informatio	n on this sta	atement and	I in any atta	achments is tr	rue and correct.
	X	/s/ Maurice Liggins	>	/s/ Deb	ra Liggins			
	_	Maurice Liggins		Debra I				
	;	Signature of Debtor 1		Signatur	e of Debtor 2	2		
		December 5, 2018	Date		ber 5, 2018	8		
		MM / DD / YYYY	1224 2	MM / DD	/ YYYY			
	•	ou checked line 14a, do NOT fill out or file Form						
	If y	ou checked line 14b, fill out Form 122A-2 and fil	le it with this form.					

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debtor 1	Maurice Liggins		
Debtor 2	Debra Liggins	Case number (if known)	

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 06/01/2018 to 11/30/2018.

Line 9 - Pension and retirement income

Source of Income: Pensions

Constant income of \$3,915.00 per month.

Non-CMI - Social Security Act Income

Source of Income: Social Security

Constant income of \$1,405.00 per month.

ebtor 1	Maurice Liggins		
ebtor 2	Debra Liggins	Case number (if known)	

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 06/01/2018 to 11/30/2018.

#### Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

6 Months Ago:	06/2018	\$740.00
5 Months Ago:	07/2018	\$740.00
4 Months Ago:	08/2018	\$740.00
3 Months Ago:	09/2018	\$740.00
2 Months Ago:	10/2018	\$740.00
Last Month:	11/2018	\$740.00
	Average per month:	\$740.00

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Cha	pter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
_	¢310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## United States Bankruptcy Court Northern District of Ohio

In re	Maurice Liggins Debra Liggins		Case No.		
111 10	Debra Liggins	Debtor(s)	Chapter	7	
				DEOD (C)	
	DISCLOSURE OF COM	PENSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplat	filing of the petition in bankruptcy, o	r agreed to be paid	to me, for services	
	For legal services, I have agreed to accept		\$	699.00	
	Prior to the filing of this statement I have recei	ved	\$	699.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	$\blacksquare$ Debtor $\square$ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed c	compensation with any other person ur	nless they are meml	bers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				law firm. A
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspects	of the bankruptcy c	ase, including:	
1	<ul> <li>a. Analysis of the debtor's financial situation, and r</li> <li>b. Preparation and filing of any petition, schedules,</li> <li>c. Representation of the debtor at the meeting of cr</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors reaffirmation agreements and applications of liens or</li> </ul>	statement of affairs and plan which needitors and confirmation hearing, and to reduce to market value; exencations as needed; preparation a	nay be required; any adjourned hear nption planning;	rings thereof;	I filing of
<b>6.</b> ]	By agreement with the debtor(s), the above-disclose Representation of the debtors in any any other adversary proceeding.			es, relief from st	ay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement coankruptcy proceeding.	of any agreement or arrangement for p	ayment to me for re	epresentation of the	e debtor(s) in
D	December 5, 2018	/s/ Edward S Lake			
D	Date Control of the C	Edward S Lake			
		Signature of Attorney <b>Lake Legal Service</b>	es. I I C		
		4450 Belden Village			
		Suite 804			
		Canton, OH 44718 (330) 605-3508 Fa	v. (330) 403 0346	•	
		info@ohiobankrup	` '	,	
		Name of law firm			<del></del>

## United States Bankruptcy Court Northern District of Ohio

In re	Maurice Liggins Debra Liggins		Case No.	
	202.4 2.550	Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtors hereby verify	that the attached list of creditors is true and co	orrect to the best	of their knowledge.
Date:	December 5, 2018	/s/ Maurice Liggins		
		Maurice Liggins		
		Signature of Debtor		
Date:	December 5, 2018	/s/ Debra Liggins		
		Debra Liggins		
		Signature of Debtor		

Acceptance Now 5501 Headquarters Plano, TX 75024

AEP Ohio P.O. Box 24401 Canton, OH 44701

AT&T P.O. Box 6416 Carol Stream, IL 60197

Aultman Hospital 2600 Sixth Street SW Canton, OH 44710

Canton Municipal Court 218 Cleveland Avenue SW P.O. Box 24218 Canton, OH 44701

Capital Recovery Systems 750 Cross Pointe Road Suite S Columbus, OH 43230

Carrington Mortgage Services P.O. Box 5001 Westfield, IN 46074

Cavalry Portfolio Services 500 Summit Lake Dr. Suite 4A Valhalla, NY 10595

CBSC 1225 North Main Street North Canton, OH 44720

CMCS Premium Recovery 10192 Grand River Road Suite 111 Brighton, MI 48116-6531 Convergent Outsourcing P.O. Box 9004 Renton, WA 98057

CSE Federal Credit Union 1380 Market Avenue, N Canton, OH 44714

Debt Recovery Solutions 6800 Jericho Turnpike Suite 113E Syosset, NY 11791

DirecTV P.O. Box 5007 Carol Stream, IL 60197

Diversified Consultants P.O. Box 551268 Jacksonville, FL 32255

Fidelity Collections 855 S. Sawburg Avenue Suite 103 Alliance, OH 44601

Grass Master, Inc. P.O. Box 519 Canal Fulton, OH 44614

IC Systems
P.O. Box 64378
Saint Paul, MN 55164

IC Systems
P.O. Box 64437
Saint Paul, MN 55164

Jefferson Capital Systems 16 McLeland Road Saint Cloud, MN 56303

Lab Corp of America P.O. Box 2240 Burlington, NC 27216-2240 Mercy Medical Center P.O. Box 951082 Cleveland, OH 44193

Midland Funding 2365 Northside Drive Suite 300 San Diego, CA 92108

Midwest Recovery Associates 2747 W. Clay Street, A Saint Charles, MO 63301

Midwest Recovery Systems 514 Earth City Plaza Suite 100 Earth City, MO 63045

Modernpath, Inc. 5700 Southwyck Blvd. Toledo, OH 43614

NCB Management 1 Allied Drive Feasterville Trevose, PA 19053

Nicholas Financial 2454 N. McMullen Booth Rd. Bldg. C Clearwater, FL 33759

Northland Group P.O. Box 390846 Minneapolis, MN 55439

Pinnacle Law Group 10153 1/2 Riverside Drive Suite 309 North Hollywood, CA 91602

Professsional Account Management P.O. Box 1153 Milwaukee, WI 53201

Receivable Management Services 240 Emery Street Bethlehem, PA 18015

Receivables Performance 20186 44th Avenue W Lynnwood, WA 98036

RMCB P.O. Box 1235 Elmsford, NY 10523-0935

Stark County Emergency Physicians P.O. Box 20670 Canton, OH 44701-0670

Total Card, Inc. 5109 S. Broadband Lane Sioux Falls, SD 57108

Unity Health Network P.O. Box 640 Cuyahoga Falls, OH 44222

William Emley 4518 Fulton Road NW Canton, OH 44718